

# EXHIBIT A

<input checked="" type="checkbox"/> ORIGINAL <input type="checkbox"/> CO-OP		<b>INVESTIGATION REPORT</b>		BIAS INCIDENT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO DOMESTIC VIOLENCE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
1. DEPARTMENT <b>SOUTH BRUNSWICK POLICE</b>		2. ORI NO. <b>NJ0122100</b>		3. DEPT. CASE NO. <b>[REDACTED]</b>	
4. PROS. CASE NO. <b>[REDACTED]</b>		5. JUVENILE CASE NO. <b>[REDACTED]</b>			
6. VICTIM NO. <b>1 of 1</b>		7. VICTIM / COMPLAINANT NAME (LAST, FIRST, MIDDLE) <b>DAMBLY, DANIEL S</b>		8. PHONE (AREA) <b>[REDACTED]</b>	
9. SOCIAL SECURITY # <b>[REDACTED]</b>		10. <input checked="" type="checkbox"/> RESIDENT <input type="checkbox"/> NON-RESIDENT <input type="checkbox"/> UNKNOWN / NA			
11. ADDRESS (STREET, MUN. STATE, ZIP) <b>[REDACTED]</b>		12. AGE <b>[REDACTED]</b> 13. DOB <b>[REDACTED]</b>		14. SEX <b>M</b> 15. RACE <b>WHITE</b>	
16. HISPANIC <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK		17. EMPLOYER / SCHOOL <b>NY DAILY NEWS</b>		18. EMPLOYER'S ADDRESS (STREET, MUN. STATE, ZIP) <b>NY DAILY NEWS - [REDACTED]</b>	
19. BUSINESS PHONE (AREA) <b>[REDACTED]</b>		20. CRIME / INCIDENT <b>CRIMINAL MISCHIEF</b>		21. N.J. STATUTE(S) <b>2C:17-3</b>	
22. UCR <b>[REDACTED]</b>		23. STATUS <input type="checkbox"/> ATT <input checked="" type="checkbox"/> COMP		24. <input type="checkbox"/> AT <input checked="" type="checkbox"/> BETWEEN	
25. HOUR <b>23:00</b>		26. DAY OF WEEK <b>Friday</b>		27. DATE (MM/DD/YYYY) <b>01/11/2019</b>	
28. <b>HARASSMENT</b>		29. <b>2C:33-4</b>		30. <b>[REDACTED]</b>	
31. STATUS <input type="checkbox"/> ATT <input checked="" type="checkbox"/> COMP		32. NO. OF SUSPECTS <b>0</b>		33. HOUR <b>10:00</b>	
34. DAY OF WEEK <b>Saturday</b>		35. DATE (MM/DD/YYYY) <b>01/12/2019</b>			
36. <b>BIAS INCIDENT</b>		37. <b>[REDACTED]</b>		38. <b>[REDACTED]</b>	
39. STATUS <input type="checkbox"/> ATT <input checked="" type="checkbox"/> COMP		40. NO PERSONS ARRESTED <b>0</b>		41. DATE / TIME REPORTED <b>01/13/2019 16:38</b>	
42. HOW RECEIVED <b>Dispatched</b>		43. CRIME / INCIDENT LOCATION <b>[REDACTED]</b>		44. MUNICIPAL CODE <b>1221</b>	
45. DIST. / AREA <b>4</b>		46. BEAT <b>[REDACTED]</b>		47. TYPE OF BIAS INCIDENT <b>NA</b>	
48. TOTAL HRS MIN <b>20</b>		49. CHILDREN WERE: <input type="checkbox"/> PRESENT <input checked="" type="checkbox"/> NA <input type="checkbox"/> INVOLVED		50. PRIOR COURT ORDERS? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> NA	
51. RESIDED TOGETHER <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> NA		52. DOMESTIC RIGHTS SIGNED <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> NA		53. DESCRIPTION OF BIAS INCIDENT <b>NA</b>	
54. WEATHER CONDITIONS <b>CLEAR</b>		55. NUMBER OF UNITS ENTERED <b>[REDACTED]</b>		56. TECHNICAL SERVICES <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> NA	
57. TELETYPE NO. <b>[REDACTED]</b>		58. CRIMINAL WARRANT / SUM NO. <b>[REDACTED]</b>		59. MV SUMMONS / WARNING NO. <b>[REDACTED]</b>	
60. TYPE OF VICTIM <input checked="" type="checkbox"/> 1. INDIVIDUAL <input type="checkbox"/> 2. FINANCIAL <input type="checkbox"/> 3. BUSINESS <input type="checkbox"/> 4. GOVERNMENT <input type="checkbox"/> 5. RELIGIOUS <input type="checkbox"/> 6. GEN PUBLIC <input type="checkbox"/> 7. OTHER		61. INJURY TYPE (UP TO 5) <input checked="" type="checkbox"/> 1. NONE <input type="checkbox"/> 2. SEV. LACERATION <input type="checkbox"/> 3. BROKEN BONES <input type="checkbox"/> 4. LOSS OF TEETH <input type="checkbox"/> 5. MINOR INJURY <input type="checkbox"/> 6. UNCONSCIOUSNESS <input type="checkbox"/> 7. POSS INT INJURY <input type="checkbox"/> 8. OTHER MAJOR INJ.		62. RELATIONSHIP OF VICTIM TO OFFENDER(S) VICTIM IS <input checked="" type="checkbox"/> UNKNOWN / NA <input type="checkbox"/> SON <input type="checkbox"/> DAUGHTER <input type="checkbox"/> BROTHER <input type="checkbox"/> EX <input type="checkbox"/> GRAND <input type="checkbox"/> SISTER <input type="checkbox"/> IN-LAW <input type="checkbox"/> BOYFRIEND <input type="checkbox"/> HUSBAND <input type="checkbox"/> GIRLFRIEND <input type="checkbox"/> WIFE <input type="checkbox"/> CHILD OF BF / GF <input type="checkbox"/> MOTHER <input type="checkbox"/> BABYSITTER <input type="checkbox"/> FATHER <input type="checkbox"/> BABYSITTEE <input type="checkbox"/> EMPLOYER <input type="checkbox"/> EMPLOYEE <input type="checkbox"/> FRIEND <input type="checkbox"/> NEIGHBOR <input type="checkbox"/> ACQUAINTANCE <input type="checkbox"/> OTHERWISE KNOWN <input type="checkbox"/> STRANGER	
63. TOOLS USED <input checked="" type="checkbox"/> 1. UNKNOWN <input type="checkbox"/> 2. NOT APPLICABLE <input type="checkbox"/> 3. BOLT CUTTER / PLIERS <input type="checkbox"/> 4. BRICK / ROCK <input type="checkbox"/> 5. HAMMER / AX <input type="checkbox"/> 6. GLASS CUTTER <input type="checkbox"/> 7. HANGER / SLIP DEVICE <input type="checkbox"/> 8. KEY / LOCK PICK <input type="checkbox"/> 9. PRY TOOL <input type="checkbox"/> 10. OTHER		64. TYPE OF WEAPON <input checked="" type="checkbox"/> 1. UNKNOWN <input type="checkbox"/> 2. NOT APPLICABLE <input type="checkbox"/> 3. AUTOMATIC <input type="checkbox"/> 4. HANDGUN <input type="checkbox"/> 5. SHOTGUN <input type="checkbox"/> 6. RIFLE <input type="checkbox"/> 7. OTHER FIREARM <input type="checkbox"/> 8. UNKNOWN FIREARM <input type="checkbox"/> 9. KNIFE / CUT INST. <input type="checkbox"/> 10. CLUB / BLUNT OBJ <input type="checkbox"/> 11. HANDS / FEET <input type="checkbox"/> 12. VEHICLE <input type="checkbox"/> 13. FIRE / INCEND. DEV. <input type="checkbox"/> 14. DRUGS / NARCOTICS <input type="checkbox"/> 15. OTHER		65. SUSPECT ACTIONS <input type="checkbox"/> 1. ALARM DISABLED <input type="checkbox"/> 17. MULT SUSPECTS INDICATED <input type="checkbox"/> 2. ALCOHOL CONSUMED <input type="checkbox"/> 18. PHONE DISABLED <input type="checkbox"/> 3. ALCOHOL ON BREATH <input type="checkbox"/> 19. PILLOWCASE TAKEN / USED <input type="checkbox"/> 4. ATE / DRANK ON PREMISES <input type="checkbox"/> 20. POWER DISABLED <input type="checkbox"/> 5. CASED LOCATION <input type="checkbox"/> 21. RANSACKED <input type="checkbox"/> 6. CASH DEMANDED <input type="checkbox"/> 22. SELECTIVE IN LOOT <input type="checkbox"/> 7. COMPUTER EQUIP USED <input type="checkbox"/> 23. SMOKED IN PREMISES <input type="checkbox"/> 8. DEMAND NOTE USED <input type="checkbox"/> 24. UNSCREWED LIGHT BULB <input type="checkbox"/> 9. DRUGS CONSUMED <input type="checkbox"/> 25. VANDALIZED <input type="checkbox"/> 10. EXIT PREPARED <input type="checkbox"/> 26. VEH DEMANDED OR STOLEN <input type="checkbox"/> 11. GLOVES WORN <input type="checkbox"/> 27. VEH NEEDED REMOVE PROP <input type="checkbox"/> 12. KNEW LOC OF HIDDEN PROP <input type="checkbox"/> 28. VICT CLOTHES CUT / RIPPED <input type="checkbox"/> 13. LOOKOUT USED <input type="checkbox"/> 29. VICTIMS NAME USED <input type="checkbox"/> 14. MASK WORN / FACE HIDDEN <input type="checkbox"/> 30. VICTIMS TOOLS USED <input type="checkbox"/> 15. MATCHES USED FOR LIGHT <input checked="" type="checkbox"/> 31. OTHER <input type="checkbox"/> 16. PRETENDED TO BE	
66. METHOD OF ENTRY <input type="checkbox"/> 1. UNKNOWN <input checked="" type="checkbox"/> 2. NOT APPLICABLE <input type="checkbox"/> 3. ALLOWED IN <input type="checkbox"/> 4. ATTEMPT ONLY <input type="checkbox"/> 5. BODILY FORCE <input type="checkbox"/> 6. HID IN BLDG. <input type="checkbox"/> 7. KICKED <input type="checkbox"/> 8. KNOB TWIST <input type="checkbox"/> 9. LOCK BOX <input type="checkbox"/> 10. LOCK CUT / BROKEN <input type="checkbox"/> 11. LOCK PUNCHED <input type="checkbox"/> 12. LOCK SLIPPED <input type="checkbox"/> 13. OPEN / UNLOCKED <input type="checkbox"/> 14. PRIED <input type="checkbox"/> 15. REMOVED <input type="checkbox"/> 16. SMASHED <input type="checkbox"/> 17. TUNNELED <input type="checkbox"/> 18. OTHER FORCED <input type="checkbox"/> 19. OTHER NON-FORCED		67. POINT OF ENTRY <input type="checkbox"/> 1. UNKNOWN <input checked="" type="checkbox"/> 2. NOT APPLICABLE <input type="checkbox"/> 3. FRONT <input type="checkbox"/> 4. REAR <input type="checkbox"/> 5. SIDE <input type="checkbox"/> 6. GROUND LEVEL <input type="checkbox"/> 7. UPPER LEVEL <input type="checkbox"/> 8. ADJACENT BLDG. <input type="checkbox"/> 9. BASEMENT <input type="checkbox"/> 10. DOOR <input type="checkbox"/> 11. DUCT / VENT <input type="checkbox"/> 12. FLOOR <input type="checkbox"/> 13. GARAGE <input type="checkbox"/> 14. LOUVRE <input type="checkbox"/> 15. PET DOOR <input type="checkbox"/> 16. ROOF <input type="checkbox"/> 17. SLIDING DOOR <input type="checkbox"/> 18. WALL <input type="checkbox"/> 19. WINDOW <input type="checkbox"/> 20. OTHER		68. LOCATION OF OFFENSE <input type="checkbox"/> 1. AIR / BUS / TRAIN TERMINAL <input type="checkbox"/> 2. BANK / S & L <input type="checkbox"/> 3. BAR / NIGHT CLUB <input type="checkbox"/> 4. CHURCH / SYNAGOGUE <input type="checkbox"/> 5. COMMERCIAL / OFFICE BLDG. <input type="checkbox"/> 6. COMMON AREA / MULTI UNIT <input type="checkbox"/> 7. CONSTRUCTION SITE <input type="checkbox"/> 8. CONVENIENCE STORE <input type="checkbox"/> 9. DEPART / DISCOUNT STORE <input type="checkbox"/> 10. DRUG STORE / DR OFF / HOSP. <input type="checkbox"/> 11. FACTORY <input type="checkbox"/> 12. FIELD / WOODS <input type="checkbox"/> 13. GAS STATION <input type="checkbox"/> 14. GOVERNMENT / PUBLIC BLDG. <input type="checkbox"/> 15. GROCERY / SUPERMARKET <input type="checkbox"/> 16. HIGHWAY / ROAD / ALLEY <input type="checkbox"/> 17. HOTEL / MOTEL / ETC <input type="checkbox"/> 18. LAKE / WATERWAY <input type="checkbox"/> 19. LIQUOR STORE <input type="checkbox"/> 20. MALL <input checked="" type="checkbox"/> 21. PARKING LOT / GARAGE <input type="checkbox"/> 22. RESIDENCE / HOME <input type="checkbox"/> 23. RESTAURANT <input type="checkbox"/> 24. SCHOOL / COLLEGE <input type="checkbox"/> 25. SPECIALTY STORE <input type="checkbox"/> 26. OTHER / UNK	
69. TARGET <input type="checkbox"/> 1. UNKNOWN <input type="checkbox"/> 2. NOT APPLICABLE <input type="checkbox"/> 3. ATTIC <input type="checkbox"/> 4. BASEMENT <input type="checkbox"/> 5. BATHROOM <input type="checkbox"/> 6. BEDROOM <input type="checkbox"/> 7. CASH REG / DRAWER <input type="checkbox"/> 8. COIN OP. MACHINE <input type="checkbox"/> 9. CUSTOMER <input type="checkbox"/> 10. DINING ROOM <input type="checkbox"/> 11. DISPLAY ITEMS <input type="checkbox"/> 12. FAMILY ROOM <input type="checkbox"/> 13. GARAGE / CARPORT <input type="checkbox"/> 14. KITCHEN <input type="checkbox"/> 15. LIVING ROOM <input type="checkbox"/> 16. OWNER / EMPLOYEES <input type="checkbox"/> 17. PEDESTRIAN <input type="checkbox"/> 18. SAFE / BOX <input type="checkbox"/> 19. STORAGE SHED <input type="checkbox"/> 20. VEHICLE <input checked="" type="checkbox"/> 21. OTHER		70. TOTAL VALUE OF PROPERTY <b>[REDACTED]</b>		71. ORGANIZED GROUP NAME <b>NA</b>	
72. VEHICLE OWNER'S NAME <b>DAMBLY, DANIEL S</b>		73. YEAR <b>2006</b>		74. MAKE <b>[REDACTED]</b>	
75. MODEL <b>[REDACTED]</b>		76. BODY TYPE <b>K</b>		76. COLOR <b>[REDACTED]</b>	
76. REGISTRATION NO. <b>[REDACTED]</b>		76. STATE <b>NJ</b>		79. VIN / OTHER IDENTIFYING NO. <b>[REDACTED]</b>	
80. MO / PERSONS <b>[REDACTED]</b>		W. WITNESS <b>[REDACTED]</b>		R. PERSON REPORTING <b>[REDACTED]</b>	
S. SUSPECT <b>[REDACTED]</b>		A. ARRESTEE <b>[REDACTED]</b>			
81. CODE <b>[REDACTED]</b>		82. NAME <b>[REDACTED]</b>		83. ADDRESS <b>[REDACTED]</b>	
84. CITY <b>[REDACTED]</b>		85. STATE <b>[REDACTED]</b>		86. PHONE <b>[REDACTED]</b>	
87. DOB <b>[REDACTED]</b>		88. RACE <b>[REDACTED]</b>		89. SEX <b>[REDACTED]</b>	
90. SS# <b>[REDACTED]</b>					
***** PARTIES INVOLVED *****					
91. WAS A SUSPECT ARRESTED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		CAN A SUSPECT BE DESCRIBED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		CAN SUSPECTS VEHICLE BE IDENTIFIED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
CAN A SUSPECT BE NAMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		WAS THERE A KNOWN WITNESS TO THE CRIME? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		IS STOLEN PROPERTY TRACEABLE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
CAN A SUSPECT BE LOCATED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		IS THERE A UNIQUE M.O. PRESENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		WAS PHYSICAL EVIDENCE RECOVERED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
92. PRINT RANK / OFF. NAME <b>PATROLMAN RASK, ROBERT</b>		93. BADGE NO. <b>503</b>		94. PAGE NO. <b>1 OF 2</b>	
95. REPORT DATE <b>01/13/2019</b>		96. <input type="checkbox"/> CLR BY ARREST <input type="checkbox"/> UNFOUNDED <input type="checkbox"/> EXCPTL CLRD		97. STATUS <b>[REDACTED]</b>	
98. REVIEWED BY <b>SERGEANT KUCHMA, MICHAEL</b>					



<input checked="" type="checkbox"/> ORIGINAL <input type="checkbox"/> CO-OP		INVESTIGATION REPORT			BIAS INCIDENT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO DOMESTIC VIOLENCE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
1. DEPARTMENT SOUTH BRUNSWICK POLICE	2. ORI NO. NJ0122100	3. DEPT. CASE NO. [REDACTED]	4. PROS. CASE NO.	5. JUVENILE CASE NO.		

ROLE: Suspect | NAME: FRIEND, MARTHA H | HOME ADDRESS: [REDACTED] |  
HOME PHONE: [REDACTED] | SEX: F | DOB: [REDACTED] | AGE: 49 | HEIGHT: 5' 5" | WEIGHT: 121 | DL#: [REDACTED]  
[REDACTED] | DL EXP: [REDACTED] | DL STATE: NJ | SS#: [REDACTED]

ON SUNDAY, JANUARY 13, 2019, I, PTL. RASK, WAS DISPATCHED TO 1005 BLOSSOM CIRCLE FOR A REPORT OF CRIMINAL MISCHIEF.

UPON ARRIVAL, I SPOKE TO THE REPORTING PARTY, DANIEL DAMBLY. DAMBLY STATED THAT THE FRONT TIRES ON HIS VEHICLE (NJ C59FEF) WERE SLASHED SOME TIME DURING THE OVERNIGHT HOURS BETWEEN FRIDAY, JANUARY 11, AND SATURDAY, JANUARY 12. ONE OF THE TIRES WAS FLAT, AND THE OTHER WAS DAMAGED, BUT WAS STILL HOLDING AIR. THERE WAS ALSO DAMAGE TO THE WHEELS, WHICH MAY HAVE BEEN PRE-EXISTING DAMAGE.

DAMBLY STATED THAT HE MAY HAVE BEEN TARGETED BY "ANTIFA" DUE TO HIS AFFILIATION WITH THE "EUROPEAN HERITAGE ASSOCIATION." HE STATED THAT A PRINCETON SCHOOL TEACHER, MARTHA FRIEND, HAD POSTED A PICTURE OF HIS VEHICLE ON TWITTER THIS PAST NOVEMBER. HE ALSO STATED THAT ANOTHER TWITTER USER, KNOWN AS "ANTIFASHGORDON", DOXXED HIM A FEW MONTHS AGO BY RELEASING HIS HOME ADDRESS, EMPLOYMENT DETAILS, PICTURES OF HIS VEHICLE, AND A SATELLITE IMAGE OF HIS HOUSE TO TWITTER. HE BELIEVES THAT THE ACTOR USED THIS INFORMATION TO FIND HIS VEHICLE AND SLASH HIS TIRES TO PREVENT HIM FROM DRIVING TO A SCHEDULED PROTEST IN PRINCETON ON SATURDAY.

HE ALSO STATED THAT HE RECEIVED A TEXT THIS WEEKEND FROM AN UNKNOWN SUBJECT ([REDACTED]) ASKING HIM, "SO YOUR THING WENT WELL TODAY? DID YOU GUYS GET THERE OK?" HE BELIEVES THIS SUBJECT MAY HAVE BEEN INVOLVED WITH DAMAGING HIS TIRES.

DAMBLY ESTIMATED THE DAMAGE TO BE APPROXIMATELY \$600.

A CANVASS OF THE AREA WAS CONDUCTED. NO NEIGHBORS WITNESSED ANYTHING SUSPICIOUS AND THERE WERE NO CAMERAS IN THE AREA.

EVIDENCE TECHNICIAN GARRISON PHOTOGRAPHED THE VEHICLE AND THE DAMAGE. HE DID NOT RECOVER ANYTHING OF EVIDENTIARY VALUE.

DETECTIVE SHELCHUSKY, THE BIAS INCIDENT LIAISON, WAS NOTIFIED BY MYSELF AND SGT. HERMAN. THE BIAS INCIDENT FORM AND INVESTIGATION REPORT WERE FAXED TO MCPO.

I SPOKE TO DET. 1. ED BRITA AT THE CENTRAL SECURITY BUREAU. HE STATED THAT THE MATTER DID NOT APPLY TO HIS BUREAU, BUT HE WILL FORWARD THE INFORMATION TO THE JTTF.

ADDITIONAL PATROLS WERE SET UP IN THE AREA.

MARTHA FRIEND

LITTLEBROOK ELEMENTARY  
SCHOOL  
PRINCETON NJ